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FISKE FUND PRIZE DISSERTATIONS OF THE RHODE ISLAND MEDICAL SOCIETY.

NO. III. — BY DAVID KING, JR. M.D., NEWPORT.

[Communicated for the Boston Medical and Surgical Journal.]

AT a meeting of the FISKE FUND TRUSTEES, held at *Newport, R. I.*, on the 27th day of June, A. D. 1837, it was decided that the Dissertation bearing the motto, "*Duo in morbis præstanda sunt; adjuvare, aut saltem non nocere*," and which, on breaking the seal of the accompanying letter, was found to be written by David King, Jr. M.D., of Newport, was entitled to the premium of *forty dollars* offered for the best Dissertation on the question, "What are the causes and nature of Cholera Infantum, and the best mode of treatment to be employed therein?" In awarding the premium to this Dissertation, neither the Trustees nor the Rhode Island Medical Society hold themselves responsible for the doctrines herein inculcated, treatment recommended, or opinions advanced.

Signed,
CHARLES E. ELDRIDGE,
SAMUEL WEST,
WILLIAM G. SHAW.

"*What are the causes and nature of* CHOLERA INFANTUM, *and the best mode of treatment to be employed therein?*"

CHOLERA INFANTUM has not hitherto received that attention which its prevalence and fatality demand. Its literary history includes only the recorded experience of a few medical observers, whose researches tend more to illustrate the symptoms and progress of the disease, than to unfold its pathological states and relations. Its attacks are almost entirely confined to teething children, especially during the period which intervenes between their fifth and twentieth month. It prevails, during the warm season, in the large towns of Europe and the United States, and in climates within the tropics. In the United States, its prevalence is mostly confined to large and crowded cities, between the months of May and October. In the country it seldom makes its appearance, except occasionally in villages where the houses are very compact, or in localities rendered unhealthy by their moisture and low situation. It commences in the southern States, the Carolinas, Alabama, Louisiana and Mississippi, in April or May; in Pennsylvania, Maryland, Virginia, Kentucky and Ohio, in June; in New England, in August, where the disease is most frequent in September.

Its fatality is very marked; it being about one fourth of all the deaths among children in our large cities. Its ravages seem to increase, as we approach towards the equator. In the city of Philadelphia, the average number of deaths, among children under two years of age, is two hundred annually. In 1823, two hundred and fifty children died of cholera infantum in Baltimore. In Cincinnati, its fatality is very great. Dr. Cartwright remarks, that the traveller, on visiting the burial places of that city, is astonished at the immense number of children's graves.

Cholera infantum most commonly commences with vomitings and purgings, which are associated with high febrile excitement. Diarrhœa, in some instances, precedes, for several days, the occurrence of vomiting, but most frequently they occur simultaneously, or alternate with each other. Functional disturbance of the nervous system, and slight irritation of the mucous membrane of the alimentary canal, usually precede the vomitings and purgings. The matters vomited consist, at first, of a greenish or yellow fluid, and afterwards of a frothy mucus, and of drinks that may be given to the patient. The alvine discharges occur from three to twenty times in the course of twenty-four hours. The dejections vary in appearance, sometimes consisting of an abundant secretion of mucus, slightly tinged with bile, and mixed with pieces of curd, if the child have been fed on milk; sometimes they consist of a copious exhalation of serum, containing small portions of mucus; sometimes they are slimy and bloody, without any tinge of bile. The fæcal matter is mostly retained in the intestines; small portions of it occasionally escape with the other discharges. The discharges want the true fæcal smell; they are, mostly, sour or putrid, like water in which putrid meat has been washed. As the disease advances, the secretion of bile is suspended.

This irritability of the alimentary canal is accompanied by a remittent fever, whose exacerbations are highest in the evening. The patient is restless and irritable. The pulse is small, quick, and frequent, sometimes corded. The thirst is intense, in all stages of the disease. The tongue is covered at first with a thin white fur, but gradually acquires a dry, red, and polished appearance, particularly when the disease is prolonged.

The patient evidently experiences the same indescribable distress about the epigastric and præcordial regions, which is felt in the cholera of adults. In severe cases, spasms occur in the abdominal muscles, and in the muscles of the extremities. The patient draws up his feet, and is uneasy in every position.

The brain is, early, sympathetically affected, as indicated by a tendency to stupor or delirium. The eyes are either fierce, or dull and inanimate, and the patient sleeps with them half open. The head and abdomen are hot, while the extremities are cold.

In the most violent form of the disease, the vital powers are suddenly exhausted, the extremities become cold and damp, the surface of the body collapsed, and death ensues within a single day. Fatal exhaustion rarely occurs, however, before the fifth or sixth day.

In many cases, the vomiting and severe symptoms gradually diminish, a general moisture of the skin and an equal distribution of temperature ensue, and convalescence begins in five or six days from the commencement. If convalescence do not occur in a few days, rapid emaciation takes place. The whole adipose substance appears to be absorbed. The skin is dry and harsh; on the forehead it appears tight, as if bound to the bone; on the inner part of the thighs, and over the abdomen, it has a wilted appearance. The countenance is contracted, and of a deadly paleness. The nose is sharp, and the lips thin and shrivelled, as in old age. The extremities are cold and damp, and the head and abdomen preternaturally hot. The thirst is excessive, and the desire of cold drinks constant. The irritability of the stomach is so great, that cold water, the only drink which the patient does not refuse, is retained but a few moments after being taken. The disease may continue thus for many weeks, and yet recovery may occur from such excessive exhaustion and emaciation.

Frequently, a fatal termination is produced by the affection of the brain, which assumes the form of acute hydrocephalus. The little patient rolls his head about when awake; when asleep, the eyelids are half closed and the eyes turned up. He gradually sinks into a state of insensibility, so that, as noticed by Dr. Rush, flies alight on the eyes when open, without exciting a movement of the eyelids for their removal. Death generally occurs in a paroxysm of convulsions.

Another termination results in the more protracted forms of the complaint. The disease seems to fix with a firmer grasp upon the intestines. The alvine discharges are dark and offensive, and so acrid as to excoriate the parts about the anus. The function of digestion is suspended, and the ingesta pass through the intestines in an unaltered state. The thirst is excessive. Aphthæ appear on the tongue and inside of the cheeks, and purple spots on various parts of the skin. The face and feet become œdematous; the abdomen tympanitic; the patient dies in a comatose state.

Prognosis.—The prognosis is very uncertain in this disease. A favorable issue may be expected when the liver resumes its functions, and the alvine discharges assume a natural appearance. The renewed secretion of bile, causing dark bilious discharges; a uniform moisture of the skin, and a natural temperature equally diffused over the surface of the body; the cessation of the irritability of the stomach and bowels, of the fever, and cerebral disturbance, are among the favorable prognostics. An increase of the cerebral symptoms, of the restlessness and spasms; convulsions, extreme nervous sensibility, or coma; a small thready pulse; hurried respiration; constant vomiting; watery, greasy, reddish, and dark flocculose discharges; stools of pink-colored margin; cold clammy surface, and haggard countenance, are among the principal unfavorable signs. Dr. Dewees notices, as fatal signs—the appearance upon the chest of a crystalline eruption, consisting of an immense number of watery vesicles; live worms crawling from the throat, and the thrusting of the hand or fingers into the back part of the mouth, as if to remove something from the throat. Dr. Rush says, "An emaciation of the body to such a degree as that the bones come through the skin, livid spots, a singultus, convulsions, a strongly-marked Hippocratic countenance, and a sore mouth," generally precede the fatal termination of this disorder.

Diagnosis.—The disease can rarely be mistaken for other intestinal diseases of infancy. Dr. Jackson says that the disease has been sometimes confounded with an affection of children previous to the age of dentition; arising from some error in diet, or from general debility and indigestion, in the nurse; the alvine discharges being frequent, and consisting partly of fæcal matter, and partly of mucus colored with green bile, of curdled milk, and a watery fluid. This disease is readily distinguished from cholera infantum, by the want of that constitutional disturbance which interrupts the growth and vigor of the body.

Causes of Cholera Infantum.—In the first place, this disease has a specific miasmatic cause. Most endemic maladies, probably, arise from some emanation from the soil, owing to the dissolution of animal and vegetable matter. We know not the nature of these miasms, because they are beyond the reach of our senses and the analyzing processes of art. It is probable, however, that, at first, the animal and vegetable matter is decomposed into atoms of effluvia; and that these atoms of effluvia enter, afterwards, into those peculiar combinations which constitute specific miasms. Our knowledge of the origin of febrile miasm consists, chiefly, in the established fact, that for its production are required a combination of four elements—animal or vegetable matter, atmospherical air, a high temperature, and water in a moderate quantity. But the circumstances of temperature and moisture, elevation, texture and depth of soil, which determine the specific form of the febrile miasm, are beyond the reach of our observation and experiment. We do not know all the combined causes required to produce "hepatitis on the coast of Coromandel, elephantiasis in Malabar, beriberi in Ceylon, Barbadoes leg in the Antilles, goitre among the Alps, the plica in Poland, cretinism in the Vallais," or cholera infantum in the large cities of the United States. The existence of the febrile miasm, producing cholera infantum, is known by its effects. It is confined to particular localities, supplied with materials for the production of miasm. Were the disease attributable to common causes, as heat, moisture, and atmospherical vicissitudes, this pestis infantum would be a pervading disease, through the whole range of the United States. But its great source is to be found, only, in our large cities, where heat, moisture, a semi-stagnant atmosphere, and filth, or animal and vegetable remains, spread over a large surface, readily produce the *malarious emanation.*

Dr. Eberle has offered two objections to the malarious origin of cholera infantum. 1st. Its occurrence is almost exclusively confined to the period during which the process of primary dentition is going on. 2d. In the eastern cities of America, particularly in Philadelphia, it often prevails extensively during the months of June and July, some time before the ordinary miasmatic diseases are wont to make their appearance in our climate. To the first objection, we answer, that it is not unphilosophical to suppose that a febrile miasm may be injurious during the first two years of infancy, and that the increased stability and firmness of the constitution may, afterwards, resist its deleterious effects. The second objection involves an assumption of knowledge to which medical science has not yet attained. We do not know the exact periods of time required for the production of different febrile miasms. The miasm of yellow fever requires the continuance of tropical heat, at least for a month.* The miasm of cholera infantum may require a less degree of heat, for a comparatively short period.

Among the concurrent causes of this disease, we may mention the age of the patient, dentition, high atmospheric temperature, impure air, atmospherical vicissitudes, and errors in diet, with premature weaning.

1st. *The Age of the Patient.*—The animal organism is, as yet, in the progress of development. The nervous system is in a state of growth, and undergoing those secret changes of nutrition, by which its organization is to be completed. The process of nutrition causes to be centred, there, a full supply of blood, and a high degree of vascular action. The mucous membranes are undoubtedly in a comparatively imperfect state, in regard to their organization. Their consistence is so soft as to be readily scraped off after death, in the form of a pulp. When their organization is completed, they probably possess sufficient tenacity to be dissected off as distinct membranes. The functions depending, for the regularity of their performance, on the condition of the several structures, are liable, at this period, from comparatively slight causes, to be exalted from a physiological to a pathological state. The vis conservatrix naturæ, the power, which, in the perfect state of the animal organism, maintains an equilibrium in the distribution of the vital forces, opposes, in the irritable state of infancy, but a feeble effort to the action of febrile miasm.

2d. *Dentition* is so marked an agent in the production of this disease, that some writers have thought it a necessary cause. But the fact that the cholera infantum occurs, occasionally, after the period of primary dentition, renders it unphilosophical to consider it in any other view than as a concurrent cause. Dentition, in some rare cases, causes no general disturbance of the system, and simply excites an increased secretion of saliva, and perhaps of the pancreatic fluid. In most cases, it causes a morbid irritability through the whole frame, and kindles disease in those structures which are in a state of growth, especially the nervous system and the mucous membranes. Its chief agency is exhibited in associating together diseases of the nervous centres with diseases of the alimentary canal. Hence in cholera infantum it acts by producing a primary cerebral irritation, and a consequent irritability of the stomach and bowels. Constitutional irritation from teething occurs, chiefly, during the period between the fifth and twentieth month. Hence the prevalence of cholera infantum during this period of infantile life.

3d. *High Atmospherical Temperature.*—This disease occurs, only, during the warm season in temperate regions. Its prevalence and fatality are very marked in warm climates. Dr. Dunglison, in his work on Hygiene, explains the morbid influence of an elevated temperature on the animal economy, in the following manner: "The constant evaporation by the cutaneous and pulmonary transpiration maintains the absorbents of the intestines in a state of irregular erethism, which predisposes them to a morbid condition." High ranges of atmospheric temperature, without doubt, have a tendency to maintain the functions of the skin, the liver, and the absorbents of the intestinal canal, particularly the upper part, in a state of constant excitement. The pulmonary function, also, is not properly performed in high states of temperature. The blood, not undergoing its salutary changes in the lungs, becomes a powerful agent of disease. The morbid matters, retained in the blood from the imperfect exercise of the depurating organs, are carried, by the vascular system, to the seats of irritation, established by the concurrent causes of the disease.

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* Caldwell on Malaria.

4th. *Impure Air.*—The impure air of cities, independent of the specific miasm, predisposes the system to the disease. It acts through the medium of respiration, contaminating the blood, and lowering the general tone of the system. In the narrow lanes and alleys, and in the filthy and crowded habitations, of our large cities, the morbid agency of impure air is seen in the great prevalence of this disease. Dr. Parrish has well described its effects. "Let any one take a walk, in a summer morning, through the thickly built lanes and alleys of Philadelphia, and he will be struck with the appearance of the children reclining their heads, as if exhausted, upon the breast of their mothers, with a pale and languid countenance, a cool and clammy skin, a shrunk neck, and other signs of debility, arising from their confinement, during the night, to close and hot apartments." The prevalence of an epidemic principle seems to increase the mortality of the disease. Thus, during the prevalence of the malignant cholera, the number of deaths from cholera infantum, in Philadelphia, was as follows, according to the tables of Dr. Emerson.

	June.	July.	August.	Total.
1831.	45	132	82	259
1832.	25	134	157	316

5th. *Atmospherical Vicissitudes.*—The infantile system, exhausted and irritated by heat, dentition, and impure air, is extremely susceptible to the influence of atmospherical impressions. The cutaneous exhalents, debilitated by over-excitement, fall readily into a state of collapse, on the sudden application of cold or moisture; especially at night, during the inaction of sleep. The suppression of the cutaneous function destroys the balance of the circulation, and determines the blood to the internal organs.

6th. *Errors in Diet.*—The digestive mucous membrane, from its delicate, and perhaps imperfect texture, is liable, during the period of dentition, to morbid action. Nature has specially protected it from irritation by two expedients: 1st. A secretion of mucus, which lines the internal surface of the alimentary canal. 2d. The milk of the mother, the blandest and most digestible nourishment. Premature weaning, by substituting an artificial diet for that which Nature has appropriated to the infant, produces febrile disturbance and irritation of the digestive mucous surface. Hence the diarrhœa of teething children often follows weaning at an improper age or season. The following valuable remarks, by Dr. Jackson, are worthy of attention. "Children are benefited by living principally on the breast for twelve months; their vigor is evidently impaired, in almost all cases, when they are nursed less than nine months. The safest period of the year for weaning, is from the middle of October to the middle of March; provided they be not weaned under ten months, after December; under eleven, after January; nor under twelve, after February. Children who are weaned at the age of twelve months in March, are ordinarily safe; those who are weaned at this age in April are less so, one half of them suffering severely in the subsequent summer or autumn. In May the danger increases; and in the four subsequent months, if a child of any age be weaned, it will in most cases be very sick before the middle of the October ensuing."* In children, who have been weaned at the improper age and season, food of difficult digestion, and overfeeding, frequently cause disordered function of the digestive organs.

[To be continued.]

SOME OBSERVATIONS ON THE ITCH INSECT.

BY CHARLES GORDON, M.D. BOSTON.

[Communicated for the Boston Medical and Surgical Journal.]

The existence of an insect, in the disease vulgarly denoted the *itch*, has been a subject of much controversy. The earliest medical writers allude to it only as a popular opinion, not entertained by the learned. According to Bateman, the earliest record of this insect by a medical author, was made in the 12th century, by Avanzoin, an Arabian. Afterwards, it was described in the 17th century by Mouffat, an English writer. Still later, Redi and Bononio, Italian physicians, published very minute descriptions of its physical character. Linnæus gave it the scientific name of *Acarus Scabiei;* but at a subsequent period, finding a very strong resemblance between this insect and the grub of cheese, he classed them as the same variety. This opinion was entertained until 1812, when Galès, an apothecary at the St. Louis Hospital at Paris, made some very interesting researches, and clearly pointed out the differences between these insects. His researches were submitted to the members of the Institute and of the School of Medicine, who, being convinced of their correctness, declared that the existence of the acarus was placed beyond all doubt. Again, in 1818, it became a matter of dispute among the most skilful observers, whose examinations had been unsuccessful. It eluded the search of Alibert, Lugol, and Biett, who therefore denied its existence, and, reviving the opinion of Linnæus, declared that the insect which had been produced, and believed by the members of the Institute to have been found in this disease, was the grub of cheese. So confidently did Lugol receive this opinion, that he offered 300 francs to any one who should take the insect from a patient before his own eyes. Thus the matter rested from 1828 to 1834, when M. Renucci, a Corsican, who was familiar with the situation of the insect, from having repeatedly extracted it in his own country, where indeed the peasants themselves removed it with the greatest facility, extracted several in the presence of many professors and students at St. Louis. He received the reward of

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* Remarks on the morbid effects of Dentition, by Dr. James Jackson. New England Journal of Medicine and Surgery, Vol. I. p. 18.

Lugol, and had the honor of having established the existence of the acarus in the itch as an article of medical faith in the minds of the sceptical professors of Paris.

This insect is exceedingly small. " In actual size, it is about that of a mark left on paper by the gentle insertion of the point of a fine needle." It is a mere white speck, the form of which even cannot be made out. Seen through a microscope, its physical characters may be quite distinctly traced. For want of an instrument of sufficient power, I am unable to verify the minute descriptions made by M. Raspail and others. Its shape is similar to that of a turtle. It is very hard, being with difficulty penetrated with the point of a needle; its back is rough and uneven, resembling considerably the surface of a scale of a fish. It has a head and eight feet,—four anterior and four posterior, of similar organization. From the posterior part of the body extend, backwards, eight stiff hairs, four of which are connected with the hind feet, and the other four are attached to as many small eminences on the inferior surface. For a scientific and more minute description, the reader is referred to a Memoir of M. Raspail, published at Paris, in 1834; a part of which may be found in the chapter on Parasitic Animals, in the 3d volume of the work of Rayer on Diseases of the Skin.

The acarus is seldom found in the vesicles, a circumstance which probably accounts for the failure of those who have sought for it in vain, and consequently denied its existence. Its situation is a little distance from the vesicles, at the termination of a black line leading from them. This line, when examined with a lens, appears to be made by the insect in its passage from the vesicle, by dividing the epidermis, or by destroying it. The adhesion of the dirt to this line gives it the black appearance, and makes it distinct. That this black line is made in this way, appears reasonable from the fact that it is very seldom, if ever, found on the arms or body, which are covered from the dirt. It has been remarked that the number of insects is much smaller than the number of vesicles. On the hands this is not true; on the arms and body it appears to be so. But there is no reason why the insect should not exist on any part where the vesicles appear. I have, however, never been able to find one on the body, a circumstance accounted for by the impossibility of discovering its course and situation. By carefully picking at the termination of the line with a pin, the insect may be readily removed; it clings closely to the pin, and may be safely carried a considerable distance.

The relation of the acarus to the development and propagation of the itch, is an important practical inquiry. Dr. Good regarded it as a consequence and not a cause of the disease, and explains its production by supposing that the weakness of the skin, caused by the disease, renders it a " suitable nidus for worms and insects to burrow in." This opinion is very unsatisfactory; for the functions of the skin are much more deranged and weakened by other eruptions than by the itch, especially by many of the pustular forms, without the production of such insects; and the secretions are also much less abundant and foul, and therefore less likely to make a suitable nidus for them. In 1834, a student of St. Louis Hospital confined several of the insects underneath a watch crystal. A development of characteristic vesicles was produced in a few days, attended with intolerable itching. This experiment is conclusive, and establishes beyond doubt the power of the insect to develope the disease. The itch has been always considered to be eminently contagious; owing, of course, to the contact of the fluid of the vesicle with the body. This may be one way of communication, when the fluid is applied in a fresh state; but it must be a very uncertain one, and insufficient to account for the facility with which it sometimes spreads—for the absorbent power of the epidermis is very slow and uncertain, unaided by a certain degree of heat and sufficient moisture. One of the most common ways of taking the disease is by sleeping in a bed which had been occupied by a person affected. The fluid of the vesicles, in a dry state on the bedclothes, could not be readily absorbed, notwithstanding the favorable conditions of the warmth of the bed and the perspiration of the body. The matter from a chancre or a bubo very frequently gets on the clothing of a patient, but the development of a chancre in this way has never been remarked. The escape of the insect in the bed is certainly the most rational and the most direct way of accounting for the communication of the disease. At the St. Louis Hospital, I have been very often surrounded by a dozen patients with the itch, and while searching for the insect have repeatedly held their hands in my own a long time, and touched very often the parts affected, without ever taking it.

From these facts, I have been led to doubt that the itch is a contagious disease, in the strict sense of the term—that it is communicated by the mere contact of the fluid of the vesicle with the surface of the body. Perhaps it may be inoculated, in the manner of the vaccine virus, by inserting the fluid underneath the epidermis. I shall improve the earliest opportunity to make the experiment of inoculation upon myself.

The propagation of the itch by the insect is unquestionable; but whether it is the only cause of its communication, is a question which I shall endeavor to settle, by positive experiments, at a future time.

MESMERISM.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—It was my misfortune to be educated in the old school of theology, politics, and medicine; so that it is with extreme difficulty that I have been able to divest myself of opinions, which I imbibed nearly as early as my mother's milk. But it is impossible to resist the everwhelming evidence of facts. Indeed, as new converts are always zealous, it is possible that I may have vibrated from one extreme to the other. I formerly believed in the imperfection and limited powers of human nature; but now I have full faith in the doctrine of the perfectibility of man.

I was always sensible that the compass, gunpowder, printing, the telescope, the mathematics, the discovery of the circulation of the blood, with the addition of chemistry and several other arts and sciences, had elevated the moderns far above the ancients. But these were only distant approximations, and there was a wide space between our acquirements and absolute perfection. In our day, the application of steam, and the discoveries of homœopathy and phrenology, rather shook my faith. Hahnemann revealed that the duodecilionth part of a grain or drop of medicine is more efficacious than an ordinary full dose; and phrenology taught that it is only necessary to examine the head of a child, to enable us to give him an education exactly suited to his powers, so as to fit him for his proper employment.

It was reserved for animal magnetism to crown the climax, and demonstrate the unlimited capacity of man for improvement. As respects its possessor, it gives him universal knowledge, with little short of ubiquity of person. As knowledge is power, the energy and capacity of man will be hereafter unlimited. This discovery, alone, far exceeds all the other improvements and advantages which the moderns possess over the ancients. Its incomparable benefits are so numerous and so extensive, that I am able to glance at only a very small part of them, in one short essay.

In the first place, as respects public affairs, it will be an omnipotent political engine. The Secretary of the Treasury will have only to procure a sufficient number of magnetized clerks, and while they sit in his office, set them to examine all the vaults and iron chests in the Union, to ascertain every dollar of specie in the country. There can nothing be secreted from their all-searching mental eyes. The assessors of taxes, by the same means, can read every bond and mortgage, and estimate, to a cent, how much a miser is worth. The Secretary of War may direct his clerks to point out every swamp, cave, or hollow tree, in which a single Indian is concealed; or, if he pleases to be himself magnetized, he may overlook every battle, and see who does his duty. Every gun and every round of ammunition might be counted, and an adequate force at once be sent to overpower the enemy. Upon this principle, the Florida war might have terminated in three months, instead of three years. The Secretary of State may read all the despatches from foreign countries, before they are committed to the messengers, or are even sealed. He may be personally present at the meeting of every secret caucus or cabal, and no plot, to which he might turn his attention, could escape his notice.

Animal magnetism will be of inestimable benefit to morals. The profligate son may always be under the inspection of his father, into whatever company he goes; and the jealous wife may always have an eye upon her unfaithful husband.

There will be a complete revolution in every science and art. The mineralogist, sitting by his fireside, can explore every mine in the country; and the botanist, at home, can examine the flora of any section of the globe. I am not quite certain whether the magnetic influence extends to other planets, so as to enable the astronomer, as with the fabulous telescope of Sir John Herschel, to see the inhabitants and their occupations; but he can certainly see everything passing on earth, without a telescope.

But, after all, the greatest improvement will probably be in our proſession; and there can be no doubt that it will hereafter be highly criminal ſor any one to pretend to practiſe physic, who has not been magnetized. It will entirely reverse the method oſ acquiring medical knowledge. The common way oſ studying anatomy will be absolutely dispensed with; ſor, as the student can look through all the internal parts of the body at a glance, there will be no ſurther use ſor dissections and anatomical preparations. The French surgeon may dispense with his *speculum*, and every disgusting manual examination will be avoided. In a word, every person to whom the physician turns his eye, is a substitute ſor the dead subject. Further: in all cases that do not require manual application, it is needless to visit the patient at all. The practitioner can examine him and make the prescription in his office, without exposing himselſ to the miasm oſ the sick room, or going abroad in all kinds oſ weather.

The first thing, thereſore, ſor the medical student to do, is to go to Providence, and be magnetized. There must be a very culpable negligence somewhere, or this miraculous art, which has been discovered and reduced to system more than fiſty years, would never have advanced so slowly. By this time, the whole world ought to have been renovated. What a pity it is that our Generals had not been magnetized, beſore the Florida war.

But it is useless to lament past omissions. We have now only to exert ourselves, to diffuse ſar and wide this divine art. Let the magnetizers only exhibit halſ the spirit oſ the phrenologists, lecture in every town, and ſorm magnetic associations in every county, and a universal reſorm will be soon effected. All wars must cease, because each party will see and know every preparation and movement oſ the other. The latent causes oſ disease will be exposed and avoided, so that the sick will soon disappear.

The first measure oſ the present extra Congress ought to be, to put in requisition all the magnetizers in the country, and set them to look up our lost money and credit. There should be, at least, one magnetic professor in every port, with an honorable salary, to inſorm the merchants what is wanting in ſoreign countries, and where to make profitable shipments. By the same means, the merchant could know the quantity oſ ſoreign commodities that are still on hand at home, and regulate his imports accordingly. All complaints oſ over-trading would then be silenced.

I well know that it takes some time to remove old habits and prejudices, and to introduce a new system oſ improvement; but animal magnetism is all important, so that no delay is justifiable. It is inconceivable why the magnetizers should confine their operations to a ſew nervous women; and it is still more unaccountable why the magnetized should restrict themselves to a ſew curious experiments, which rather excite a curiosity ſor the wonderſul, than produce any practical utility. Why is not every disease within their reach cured? Why is not every shipper inſormed, the moment when his vessel is wrecked? Why is not the anxiety oſ the parent relieved ſor his son who is travelling abroad? We have an ample accumulation oſ the most positive and most credible testimony—that such cases admit oſ, iſ any prooſ is sufficient to substantiate such facts—that operations of this kind are performed, every day, at Providence. Why, then, in the name of common sense, are they not more frequently converted to some practical and permanent benefit? I may, perhaps, be accused of being enthusiastic; but I am confident that a tenth of the statements made by credible witnesses, would more than justify all the expectations expressed in this letter, of the incomparable benefits and improvements that may be expected from animal magnetism. **Mesmer.**

Sept. 16, 1837.

WORCESTER LUNATIC HOSPITAL.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—Whoever, like the present writer, has received from the Superintendent and Physician of the State Lunatic Hospital, at Worcester, the Reports and other Documents of that institution, cannot fail of having elevated opinions of the energy of benevolence, the dignified display of charity, system and propriety, with which that hospital is managed. We will, if you please, tender the homage of our respects to the physician of that establishment for the consideration with which we were honored, by having transmitted to us his Reports and Documents. They are well written, well designed, and well printed; and may, from their comprehensiveness, be well termed an *encyclopedia* of that institution.

Still, as that institution, capacious as it is, is, according to the statements given, obliged to reject scores of applicants, for want of accommodations, we extremely regret the omission, and urgently insist upon the public's having the information, of the medical mode of treatment therein adopted. This is altogether lacking in the Report. Dr. Rush observed, that it had been said that every physician wished to keep his art a secret. This slander upon the profession was repelled by that able professor, with proper dignity. But in these seven years' reports, notwithstanding the moral and domestic method is sufficiently detailed, yet the medical mode is not given. The former is fully deserving of praise, and the latter we doubt not to be equally so, from the number of cures. Yet, although withheld, it seems to be urgently called for, from the frequent mention of "active remedies," which are left undefined, and which must remain unknown to the world unless revealed by the Superintendent, as the phrase itself is evidently at variance with what physicians have usually considered *active remedies.* Thus, for example, we are told of the female patient, No. 3 (p. 164), that "she had been reduced by depletion and starvation, without any favorable effect upon her mind." And what are we told in the very next sentence? Why, that "she was immediately placed under the influence of *active remedies.*" So here we have a new display of the Materia Medica. Bloodletting, cathartics and emetics, especially when aided by starvation, have hitherto been thought *active remedies.* But at the State Lunatic Hospital, it would appear that a different view is entertained. And as these new *active remedies* had, as we learn, the desired effect, should they remain a secret from the profession? We humbly submit this inquiry to the Superintendent, of whom, from personal knowledge, and of whose official acquirements and management, no one can entertain opinions more elevated than the present writer.

There is another subject connected with these Reports, which has long been one of contemplation, and upon which we had intended to animadvert before now. The Superintendent assumes, what he thinks that no one will hesitate to admit, "that insanity, when established, should be followed by immunity from punishment." (p. 172.) We cannot coincide in this opinion, especially when we consider that it is a punishment to every insane person to be confined in a hospital, to be confined at all, and in most instances sorely against his will to take any kind of medicine whatever. But there is another view still more sombre, serious and paramount.

The Superintendent gives the case of Heller, who murdered a little innocent girl of ten years old, by cutting off her head; who afterwards murdered three of his own children, who were borne him by a respectable young wife, whom he also murdered with an axe, whilst she was nursing her infant at her breast, whose infant head he likewise cut off! And yet no insane person is to be punished! If we appeal to ecclesiastical law, which enjoins that a murderer shall not be suffered to live, we shall find that no exception is made in behalf of insane persons. Still, some commutation of punishment may often seem to be humane and expedient.

The four last murders by Heller were perpetrated in Indiana. But before they were committed, it was shown that he had previously murdered a child, "under the most appalling circumstances," in Dauphin county, Pennsylvania, where he was acquitted upon the ground of insanity. Now to the respectable Superintendent we know that no repetition, amplification, or monotony, is necessary in order for him to feel the weight of an argument. And we humbly submit the case to him, whether it would not have been immensely better that Heller should have been punished by imprisonment for life, or otherwise, than, after his first appalling murder, to have been set at liberty, and then have committed four other murders, still more appalling? Five murders in the whole! More deaths by the hand of this monster, than by the jaws of any mad dog whose history we recollect; for it has been calculated, that of twenty persons bitten by the same mad dog, upon an average only one has hydrophobia.

Now our plan is, and we should much rather that it would have emanated from the high authority of the Superintendent, because then it would have had some influence upon the public, *that no insane person, having committed murder, should be suffered to be at large.* The laws upon this point need amending, and the sooner the better.

One further consideration, and we have done. It is well known to all who have had much experience with the raging maniac, that fear is the only remnant of reason remaining. He has lost all morality, decency, filial and fraternal affection, self respect, respect for others, and honesty. Let, then, the fear of punishment be withdrawn, and wo to the lives of the friends of the maniac, and to those of the feigned maniac.

Connecticut, Sept. 1, 1837. C.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, SEPTEMBER 27, 1837.

YELLOW FEVER.

The fearful mortality from this disease at the present time, in New Orleans, so entirely contrary to what might have been anticipated by any one who has read the learned discourse of Dr. Barton on acclimation, renders it worth the while to recommence a series of investigations in relation to the exciting causes of this frightful pestilence, which for many years has received little or no attention from medical writers. There was a period in the history of this country when physicians took a very bold stand, one way or the other, in speaking of its character. While some were fully satisfied of its infectious nature, others were equally convinced that its origin and destructive activity depended on local causes which it was possible to control. Indeed, the process, by which its periodical development in cities where it had been rife, might be overcome, was confidently spoken of. Still, with all the wisdom which experience is supposed to have accumulated, human ingenuity is wholly inadequate to repress its reappearance, or ward off the shafts of death which fly from its devastating train.

It is of considerable importance to ascertain the modern treatment of yellow fever. The prescriptions of Dr. Rush were simple and bold ; but whether his system is still pursued, or whether some other is more in vogue, is not well known at the north. When a hundred men are dying daily, and that for weeks in succession, in a city which may justly be proud of its abundant medical talent, by a fever which is so truly common there that its first symptoms are recognized by every person of intelligence, it becomes seriously important to know what kind of medical treatment is meted out to the multitude of sick. The proportion of recoveries is also an item which should be known. There is no expression in any of the New Orleans papers which leads to the supposition that there are any saved. Still, it cannot be possible that all who are attacked actually die. The physicians of New Orleans, therefore, are called upon for a detailed account.

Anatomical Lectureship.—Edward Reynolds, M.D., of Boston, has been appointed to deliver the course of Anatomical Lectures at the Massachusetts Medical College, Mason Street, the ensuing term,—the Professor of Anatomy being now in Europe. This is a very satisfactory selection, and one that will contribute, we trust, to the mutual prosperity of the institution and students.

Counsellors' Meeting.—Members of the State Medical Council will observe, on the advertising page, the notice of the Secretary, Dr. Homans, who notifies a meeting at the Athenæum, on Wednesday, October 4th. A punctual attendance is quite desirable, and it is hoped, therefore, that gentlemen residing at a distance from the city will make seasonable arrangements for attending. It has so happened, for many years in succession, that only a few, if any, of the Counsellors from the western part of the State, are present at these meetings, which are of importance to the prosperity of the Society, and have a direct bearing upon the professional character and prosperity of all its fellows. Very many respectable practitioners of the interior have neglected to avail themselves of membership, which is greatly to be regretted. Every reasonable provision has been made by the Society to receive under its protection all who have just claims upon its attention.

Medical Graduates.—An anonymous correspondent must have discovered, by looking over the last Journal, that the neglect of which he complained was altogether imaginary, as the catalogue of medical graduates at the late commencement of Harvard University was published the very morning on which his letter was received. The Dean of the Faculty has never been wanting in promptness in anything relative to his official duties.

Large Adipose Tumor.—We are informed that an adipose tumor, weighing 18 pounds, and measuring 27 inches around the neck, was removed, last week, from the back of a woman, aged about 60, in Kennebunk, Me. The operation was performed by Dr. Burleigh Smart, of that place, with the assistance of Drs. Emerson, Dorrance, Morse, and students Tripp and Sawyer. The tumor was removed in eight minutes. It had been growing nearly 20 years. Recently it had ulcerated, from a slight injury, and a gangrenous sloughing had commenced, accompanied with considerable hæmorrhage.

The wound nearly all united by the first intention, and the patient seems nearly well.

Psychodinamist,—which means, Bulletin of Animal Magnetism in the United States. Such is the title of a proposed Journal, to be published semi-monthly, 16 pages large 8vo., at two dollars per annum, edited by CHARLES POYEN, *de St. Sauveur.* Whether there are people enough in America disposed to support it, is a matter of doubt: at all events, the name is, unfortunately, a terrible one to pronounce, and so unlike anything else, that we were afraid of being magnetized in attempting to speak it.

Hull's Utero-Abdominal Supporter.—A gentleman of this city, who has given considerable attention to this instrument, speaks with increasing confidence of its intrinsic value. The sale has been steadily increasing ever since it was offered in Boston, which is one of the most positive evidences of the interest taken in it. In most instances the supporter has been purchased by the advice of physicians.

To CORRESPONDENTS.—The communication on the fatal effects of opium in a case of rheumatism will be given next week. The writer of it is informed that the letter to which he refers has never been received at this office. Did he direct it to one of the agents, or to the publisher of the Journal?—The translation from the Italian will also have an early insertion.

Whole number of deaths in Boston, for the week ending Sept. 27, 38. Males, 19—Females, 19.

Consumption, 8—teething, 1—cachexy, 1—palsy, 1—apoplexy, 1—cholera infantum, 3—inflammation of the bowels, 2—atrophy, 1—dropsy in the head, 2—disease of the heart, 1—aneurism, 1—gangrene, 1—old age, 2—concussion of the brain, 1—typhus fever, 1—croup, 1—stillborn, 3.

MEDICAL SCHOOL OF HARVARD UNIVERSITY.

THE Medical Lectures in Harvard University will begin on the first Wednesday in November, in Mason street, Boston, at 9 o'clock, A. M., and continue thirteen weeks. For the following four weeks, the Hospital and Dissecting room will be kept open, and some Lectures will be given, without additional expense, to such students as may remain.

The following Courses of Lectures will be delivered to the class of the ensuing season.	*Fees.*
Anatomy, by Edward Reynolds, M.D.*	$15
Chemistry, by John W. Webster, M.D.	15
Midwifery and Medical Jurisprudence, by Walter Channing, M.D.	10
Materia Medica and Clinical Medicine, by Jacob Bigelow, M.D.	10
Principles and Operations of Surgery and Clinical Surgery, by Geo. Hayward, M.D.	10
Theory and Practice of Physic, by John Ware, M.D.	15

By an additional act of the Legislature of Massachusetts, the opportunities for the study of Practical Anatomy are now placed upon the most liberal footing, and an ample supply of subjects for the wants of science will be legally provided at a small expense.

The Massachusetts General Hospital is open without fee to students attending the Lectures of the physicians and surgeons. Clinical Lectures are given several times in each week, and surgical operations are frequent.

To the Medical College is attached a Medical Library, a costly and extensive Chemical Apparatus, and Collections illustrative of Midwifery, Materia Medica, and Healthy and Morbid Anatomy.

WALTER CHANNING,
Boston, July 5, 1837. tNov. 1. Dean of the Faculty of Medicine.

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* Professor John C. Warren being in Europe, and having announced his intention not to return this winter, the Corporation of Harvard University have appointed Edward Reynolds, M.D., Lecturer on Anatomy the ensuing winter. Professor Hayward has also been appointed to deliver the Lectures on Operative Surgery. Sept. 27. W. CHANNING, *Dean.*

[Printers whose papers contain the advertisement of the Lectures, are particularly desired to insert the above.]

MEDICAL INSTITUTION OF YALE COLLEGE.

THE course of Medical Instruction in Yale College begins on Thursday, Nov. 2d, 1837, and it continues seventeen weeks. The several branches are taught as follows, viz:

Principles and Practice of Surgery, by - - -	Thomas Hubbard, M.D.
Theory and Practice of Medicine, by - - - -	Eli Ives, M.D.
Chemistry and Pharmacy, by - - - - - -	Benjamin Silliman, M.D. and LL. D.
Materia Medica and Therapeutics, by - - - -	William Tully, M.D.
Anatomy and Physiology, by - - - - -	Jonathan Knight, M.D.
Obstetrics, by - - - - - - - - -	Timothy P. Beers, M.D.

The matriculation fee and contingent bill are $7.59; the fees for Chemistry, Anatomy, Surgery, Materia Medica, and Theory and Practice, are $12.50 each; and for Obstetrics, $6—amounting to $76—the whole to be paid in advance. The graduation fee is $15.

Yale College, Sept. 1, 1837. Sept. 13—6t

MASSACHUSETTS MEDICAL SOCIETY.—COUNSELLORS' MEETING.

A STATED Meeting of the Counsellors of the Massachusetts Medical Society will be held at the Society's Room, Athenæum Building, Pearl Street, on WEDNESDAY, 4th of October next, at 11 o'clock, A. M. Sept. 20—tm. JOHN HOMANS, *Rec. Sec'ry.*

PROLAPSUS UTERI CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri*, and other diseases depending upon relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity, from the distressing "dragging and bearing down" sensations which accompany nearly all visceral displacements of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last two years 700 of the Utero-Abdominal Supporters have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the Physician will induce him to discard the disgusting pessary hitherto in use. It is gratifying to state, that it has met the decided approbation of every member of the Medical Faculty who has ap[illegible] well as every patient who has worn it.

[illegible] Subscribers having been appointed agents for the sale of the above instruments, all orders addressed to them will be promptly attended to. Price, $10.

Lowe & Reed, Boston; David Kimball, Portsmouth, N. H., Joshua Durgin, Portland, Me., Joseph Balch, Jr. Providence, R. I.; Elisha Edwards, Springfield, Mass.; N. S. Worden, Bridgeport, Conn. May 10—6m

TO MEDICAL STUDENTS.

H. A. DEWAR, M.D. intends forming a class for the study of Dentistry, in every branch. The number will be limited, and each student will have an opportunity of becoming practically acquainted with all the operations and manipulatious requisite. Dr. D. has provided a large and commodious work-room for their exclusive use. Further particulars may be learned by calling on Dr. Dewar, No. 1 Montgomery Place. tf—Oct. 19

Boston, Oct. 7, 1836.

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